

Texas OSTEOPATHIC PHYSICIANS Journal

Volume XVI

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Number 4



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EDITORIAL PAGE

"BE PROFESSIONAL"

If you work in a profession, in Heaven's name work for it. If you live by a profession, live for it. Help advance your co-worker. Respect the great power that protects you, that surrounds you with the advantages of organization, and that makes it possible for you to achieve results. Speak well of it, stand for it. Stand for professional supremacy. If you must obstruct or decry those who strive to help, why—quit the profession. But as long as you are a part of a profession, do not belittle it. If you do, you are loosening the tendrils that hold you to it, and with the first high wind that comes along you will be uprooted and blown away, and probably you will never know why.

(EDITOR'S NOTE: *The editor takes no credit for this editorial. It is one he picked up some time ago and found in his files. He thinks it is well worth repeating and regrets he does not know the author.*)

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EDITOR . . . PHIL R. RUSSELL, D. O.

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FORT WORTH, TEXAS, SEPTEMBER, 1959

NUMBER 4

REMARKS TO A.O.A. HOUSE OF DELEGATES

July 12, 1959



GEORGE W. NORTHUP, D.O.
President, American Osteopathic Association
Livingston, New Jersey

One year ago, I made a promise to this profession. I promised to discuss with you as honestly and sincerely as I could, the problems of this profession. To fulfill this responsibility placed upon me, I would be negligent in my duty to you, and to myself, if I did not bring to you factual information concerning what I, and many others, believe to be one of our basic problems.

As I have traveled over this country of ours, meeting with you and your colleagues, I have had an opportunity which is granted to few. This opportunity has provided me a view of the osteopathic profession in action; an opportunity to observe its strengths and weaknesses. Because of this, I feel that I have a moral obligation as your President, to bring you a frank report of my observations and an equally frank report of my conclusions.

I have seen the great activity in construction of osteopathic hospitals, the expansion of our present hospital facilities, increased development of our educational institutions and renewed legislative activity in states and provinces yet to receive full practice recognition. From all outward appearances, the osteopathic profession is moving into a truly progressive era of development.

Yet, with all of this progress and activity, the most persistent question asked me by the individual member is "Where is the American Osteopathic Association headed?" Have we somewhere along the way, despite our progress, lost our sense of direction?

You know, and I know, that the question of "where are we going?" is related to our relationship with organized medicine, namely the American Medical Association and its component state and county societies.

As far back as 1943, sixteen years ago, apparently the first action was taken by the California Medical Association when it expressed a desire to take over the College of Osteopathic Physicians and Surgeons in Los Angeles and convert it into a medical school which would grant the M.D., rather than D.O. degree. It was further suggested that graduates of that college then practicing as D.O.'s in California would be permitted to take

a special course and also receive the M.D. degree.

As reported in the publication "California and Western Medicine," for September, 1943, a committee composed of Drs. Cline and Dewey and a Mr. Peart was appointed to draft a resolution which would incorporate matters upon which the Council of the California Medical Association on August 21, 1943, had come to agreement. The following resolution was submitted and adopted:

"WHEREAS, The Council of the California Medical Association has been informed that representatives of the California State Osteopathic Association have conferred with representatives of the California Medical Association concerning plans whereby osteopathic physicians and surgeons might secure additional training leading to the degree of M.D.; and

"WHEREAS, The representatives of the California State Osteopathic Association in conference have expressed their intention to:

(a) Repeal the existing osteopathic initiative;

(b) Terminate the existence of the College of Osteopathy in Los Angeles, as a college of osteopathy, and make its facilities available to an acceptable university for medical teaching; and

(c) Conclude arrangements with a university to offer a special curriculum to which an osteopathic physician and surgeon, or a student or intern at the time of consummation of such plans, may be admitted; such person to receive the degree of M.D. upon satisfactory completion of the course; and

"WHEREAS, It appears to the Council of the California Medical Association that it would be in the public interest to include the osteopathic physicians and surgeons with the doctors of medicine of California; therefore be it

"RESOLVED, That the Council of the California Medical Association ap-

proves the foregoing plan to facilitate the emerging of the osteopathic physicians and surgeons with the doctors of medicine of California; and be it

"RESOLVED, That the Council of the California Medical Association, upon fulfillment by the California State Osteopathic Association of the intentions herein outlined, will recommend that its component county societies open membership, in the usual manner, to those osteopathic physicians and surgeons who have achieved the degree of M.D. under this program, and associate membership to the osteopathic physicians and surgeons who have licenses in good standing; and be it further

"RESOLVED, That the Council of the California Medical Association will undertake to obtain approval of this program by the Council on Medical Education of the American Medical Association and the Association of American Medical Colleges."

However, the Secretary and Treasurer of the California Osteopathic Association denied that any official representatives of that Association had been authorized to discuss the matter with the California Medical Association. In a letter to the California Medical Association, he said:

"A copy of what appears to be official Minute No. 6 of the meeting of the Council of the California Medical Association of August 22, 1943 has come to our attention.

"In this document there are references to representatives of the California Osteopathic Association. We are sorry to inform you that up to the present date the California Osteopathic Association has not appointed or created any group or representatives to discuss such proposals.

"The Executive Committee of the California Osteopathic Association concurs with the Council of the California Medical Association that we have a mutual interest in the health and wel-

fare of the people of the State of California, and we would be in favor of the creation of a composite fact-finding committee, appointed by the respective official Associations, to meet, study and discuss the proposals involved in your Minute No. 6.

"If you concur in the above suggestion, the California Osteopathic Association will be happy to appoint such an official Committee."

Since that time, little has been said officially about these negotiations until December, 1958 in the Minneapolis meeting of the A.M.A. At that time, during the hearings concerning the Indiana resolution relative to osteopathy which were held by the A.M.A. Reference Committee on Medical Education and Hospitals, Dr. Donald Cass of Los Angeles, a delegate from California, stated that there were certain understandings between the medical and osteopathic professions in California that "cannot be told here." He stated further that a great amount of rapport existed between the two groups, and that the Los Angeles College may eventually be taken over which in time would cut down the number of D.O.'s in California.

Only last month, at the A.M.A. convention in Atlantic City, the issue was brought into sharper focus. In speaking before the meeting of the A.M.A. House Committee on Amendments to the Constitution and By-Laws, Dr. Bostick stated that the California Medical Association had a committee which was working with a similar committee of the C.O.A. He stated that the leaders of the osteopathic profession in California have asked and are willing to change their D.O. to an M.D. degree.

Dr. Maloney, a member of the California Board of Medical Examiners said, "Many D.O.'s have come to us for M.D. degrees. A prominent osteopathic surgeon is the liaison man in these discussions."

Later in the meeting, it seems significant that Dr. John Cline of San Francisco said that osteopathy will "go the way of the Homeopaths; let's remove the log jam."

In defending the report of the Judicial Council, its chairman, Dr. Pearson of Florida, stated that one of the best ways to eliminate the osteopathic profession is to have medical doctors teach in osteopathic colleges.

During these discussions before the reference committee of the House, the attorney of the A.M.A. said that there were representatives of the A.O.A. present. Mr. Klobnak, who was officially recorded at the Atlantic City convention as being a reporter for the A.O.A., stated that as far as he knew, he was the only A.O.A. representative present.

Throughout both of these meetings of the A.M.A., no mention was made of the fact that the A.O.A. has a Conference Committee directed to be the official representatives of the A.O.A. In fact, it is significant to note that there has been no meeting between our Conference Committee and the A.M.A. Committee for the study of Relations Between Osteopathy and Medicine since May, 1953.

In my opinion, the time has long since arrived when it is necessary to remove the discussion of these and related matters from the smoke filled rooms of a few and place them in the broad light and freedom of discussion which can best be supplied by the entire membership of this House, thinking together on a mature and openly frank basis. Certainly one must agree that unrest and uncertainty has developed throughout the country concerning the policy position of the largest divisional society of the A.O.A., namely the California Osteopathic Association. Certainly one must agree that unrest and uncertainty have developed throughout the country concerning the future of one of our largest and strong-

est educational institutions, namely the College of Osteopathic Physicians and Surgeons in Los Angeles.

For years, this uncertainty has dominated the unofficial discussions of this profession and has extended into the halls and committee meetings of the A.M.A. As already pointed out, statements coming from many sources, both from within and outside of this profession have declared that the California Medical Association and the California Osteopathic Association have worked out an understanding which cannot be discussed even in the meetings of the A.M.A.

Equally frequent and from equally diverse sources, statements are made that the College of Osteopathic Physicians and Surgeons in Los Angeles, either on their own behalf, or through representative members of the California Osteopathic Association, are negotiating for its acceptance as a "regular" medical school and is desiring to become a part of a now existent medical institution approved by the Council on Medical Education and Hospitals of the A.M.A.

In fairness to the remainder of this profession, its educational system, and its programs for the future, this profession and this House of Delegates has the right, yes, the responsibility to know whether there is any validity in these statements so that the A.O.A. can act accordingly. If we are about to lose one of our prominent and best qualified colleges, we should face that

possibility fairly and honestly. If the largest divisional organization of this profession is conducting through its leadership, official or unofficial, private negotiations with one of the largest divisional medical societies which might lead to the loss of their membership in the A.O.A., that, too, must be faced realistically and honestly.

The California Osteopathic Association and the College of Osteopathic Physicians and Surgeons have made many fine contributions to this profession. Yet, in my opinion, their greatest contribution could be made to the future of this profession by clearing the record and answering decisively these vital questions which are affecting the thoughts and actions of the entire profession and causing a large measure of concern and unrest. If we cannot learn to understand each other, how can we gain the support and understanding of others?

This is all information which is vital for the proper function of this House, as it must make certain basic decisions.

At the direction of our Executive Secretary, Mr. Klobnak, Director of the A.O.A. Division of P&PS, attended the meetings of the A.M.A., both in Minneapolis, December, 1958, and in Atlantic City, June 1959. At my direction, Mr. Klobnak was to prepare an immediate preliminary report to me, with copies to the Executive Secretary, the President Elect, and the Chairman of the Conference Committee. He was further asked to submit

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a final report which would be available for this convention. It is available and the House may have copies distributed if they so request. It is in no way confidential as all of the meetings of the A.M.A. House of Delegates and its Reference Committees were freely opened to the press. This report supplies excellent background material for your deliberations and is consistent with my belief that an informed House of Delegates has always been the strength of organized osteopathy.

Since 1952, leaders of organized osteopathy have informed their membership that amalgamation of the two professions is not the goal that we seek. The House of Delegates in 1952 stated, and reaffirmed this position in 1953, that we shall remain "a separate, complete and distinct school of medicine."

The recommendations of the House of Delegates of the A.M.A., June, 1959, are certainly not in keeping with such a statement.

Whether we like to admit it or not, far too many of our own profession, and the public at large, feel that the leadership of this profession desires and is striving toward the absorption and elimination of osteopathy by organized medicine. This is affecting our student recruitment, our appeals for funds from both within and outside our profession, and our chief line of communication to the public, the press. Whether an individual is to invest his life and future in the profession as an osteopathic physician, or his money in our educational institutions, the question immediately arises as to whether one is joining a progressive, united profession, or one that is about to hand in its assets for what seems increasingly to be a rather empty approval.

And so it is that this House of Delegates, more than any of its predecessors, has arrived at a moment of decision.

The decision should come early in this meeting because our decisions on so many other matters hinge on this one. The questions for decision should be simple and direct, and the answers, to be clearly understood, must be equally clear or we shall run the risk of self-destruction through indecision.

These questions have become particularly pertinent because of the action of the A.M.A. in June. The questions that I would raise are essentially these:

1. Do we wish to maintain the independence of our colleges or do we desire to convert them into medical schools under the supervision and jurisdiction of the Council on Medical Education and Hospitals of the American Medical Association?

2. Do we wish to take steps leading to the abandonment of our intern and residency training programs, our approved and registered hospitals; our certification recognition of our specialists and their certifying programs; our program of development and recognition of our General Practitioners; and our hard earned acceptance of the A.O.A. as a recognized accrediting agency, or are all of these to be turned over and placed under the protective custody of agencies of the American Medical Association?

3. Do we or do we not have a contribution to make to medicine not now being accomplished through the efforts of any other organization?

4. Do we wish to continue as an independent osteopathic profession, cooperative with all and subservient to none?

Actually the last question is the key to the answers to the previous ones. If it is the desire of this profession to be either eliminated, or absorbed, or amalgamated or merged with the American Medical Association, there is no necessity for our schools, our hospitals, and ourselves to be represented by this, the American Osteopathic Association.

The osteopathic profession and its institutions would then be placed truly under the "protective custody" of the American Medical Association. If we desire to maintain ourselves as an independent school of practice, meeting the responsibilities in providing health care for the people which our recognitions provide, we cannot and must not devoid ourselves of our major instruments for service. The decisions that you make must be crystal clear so that no question exists in the minds of the informed or uninformed about the position of the American Osteopathic Association.

The decision is yours.

Following Dr. Northup's remarks Donald J. Evans, D.O., President of the Michigan Association of Osteopathic Physicians and Surgeons, presented the resolution and moved its adoption. His motion was seconded and supported by the following:

Robert D. McCullough, D.O., Oklahoma

Otterbein Dressler, D.O., Michigan

Arnold Melnick, D.O., Pennsylvania

J. Scott Heatherington, D.O., Oregon

Donald A. Jaquith, D.O., Toronto, Ontario, Can.

No one spoke against the resolution.

Copies of the resolution were distributed to the members of the House of Delegates and the Speaker called for the vote. The vote was:

YES—95: NO—22

The 22 votes against the resolution were provided by 18 delegates from California; 3 of 8 delegates from Ohio; and the 1 vote representing the District of Columbia.

The resolution follows:



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A.O.A. House of Delegates from the
Michigan Delegation

1. Whereas, the osteopathic school of medicine is a complete and major school of medicine serving the American public for more than sixty years; and
2. Whereas, the osteopathic school of medicine has attained its present status on the basis of merit and acceptance by the American public; and
3. Whereas, the osteopathic school of medicine and the osteopathic profession have developed a satisfactory liaison with national, state and local governments; and
4. Whereas, the osteopathic school of medicine and the osteopathic profession have developed a system of medical education recognized by accrediting agencies and by institutions of higher learning; and
5. Whereas, the osteopathic school of medicine and the osteopathic profession have supplied an enviable system of hospitals and professional care for the public; and
6. Whereas, the osteopathic school of medicine and the osteopathic profession have taken their place in official public health services; and
7. Whereas, the first responsibility of the physician is to serve the public and not a professional organization; and
8. Whereas, the public is best served by the free choice of physician without interference from professional organizations; and
9. Whereas, the public is entitled to service from the physician of his choice in all institutions supported morally and financially by the public; and
10. Whereas, the best interests of the health and welfare of the public and of the nation are best served by the continuance of a separate and a

complete school of osteopathic medicine;

BE IT THEREFORE RESOLVED

That the osteopathic school of medicine in the interest of providing the best possible health care to the public shall maintain its status as a separate and a complete school of medicine, co-operating with all other agencies and groups that sincerely promote the same objective when that cooperation is on an equal basis granting full recognition to the autonomy and contribution of the osteopathic school of medicine.

The AOA Conference Committee was first appointed early in 1951 and was empowered to discuss mutual problems with the American Medical Association and other health associations. It was stipulated that the Conference Committee had power only to meet with other organizations and must bring back to the Board of Trustees of AOA and/or House of Delegates of AOA their conclusions, and if they had any recommendations these were to be approved by the aforementioned bodies before there could be any agreement with the other organizations with which they consulted. The personnel of this Committee consisted of the following:

Floyd F. Peckham, D.O., Chairman,
Illinois (now in New York).

Vincent P. Carroll, D.O., California.

R. McFarlane Tilley, D.O., New
York (now in Missouri).

Glen D. Cayler, D.O., California.

R. C. McCaughan, D.O., Exec. Sec.,
AOA, Illinois.

The Committee was continued from year to year as an ad hoc committee of the House of Delegates and the President of AOA, Executive Secretary of AOA, AOA Editor, and AOA attorney were designated as advisors to the Committee. There was one change in personnel occasioned by the resignation of Dr. McCaughan. Subsequently James

O. Watson, D.O., of Ohio, became a member of the Committee.

The Committee has been a continuing ad hoc group reappointed from year to year consisting of the same personnel, and has made annual reports to the Board of Trustees of AOA and the House of Delegates of AOA.

In June, 1955, the AMA House of Delegates discontinued their Committee for the Study of Relations Between Osteopathy and Medicine with which our Conference Committee had been holding irregular meetings, and there have been no meetings between representatives of these two groups since that time.

During the 1959 meeting of the House of Delegates of the AOA, the Chairman of the AOA Conference Committee made a report to the House of Delegates subsequent to the President's report and the Michigan resolution. Following which it was moved, seconded, and carried without a dissenting vote that the Chairman of the Committee and the Committee be given a vote of confidence and appreciation for the manner in which they had conducted the affairs of the Conference Committee. Following this it was also moved, seconded, and carried that a Conference Committee be continued.

Subsequently the Board of Trustees of AOA appointed an entirely new Conference Committee consisting of the following:

Carl E. Morrison, D.O., Minnesota, Chairman

Otterbein Dressler, D.O., Michigan

R. D. McCullough, D.O., Oklahoma

George W. Northup, D.O., New Jersey

Charles W. Sauter, D.O., Massachusetts

Executive Secretary Enters Hospital

The executive secretary, on September 8, entered the Fort Worth Osteopathic Hospital after having suffered for about 10 days with a gall bladder attack.

On the day he entered the hospital, they made numerous tests and X-rays, and went to surgery September 10.

It is the executive secretary's hope that he will be able to conduct the business of the Association from his hospital bed until he is able to return to the office.

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R. H. PETERSON, D.O.

The national osteopathic social fraternity, Alpha Tau Sigma, elected Dr. R. H. Peterson of Wichita Falls, Texas as secretary-treasurer for the second year.

* * *



PATRICK D. PHILBEN, D.O.

The American Osteopathic Board of Pediatrics elected Dr. Patrick D. Philben of 1143 S. Buckner Blvd., Dallas, Texas as its Vice-President.

* * *



GEORGE J. LUIBEL, D.O.

Dr. George J. Luibel, 3037 James, Fort Worth, Texas was elected President-Elect of the Kirksville College Alumni Association at its recent meeting in Chicago, Illinois.

Law Enforcement Appreciation Week

October 4-10, 1959

Let's all participate in this worthwhile effort, sponsored by the Texas Law Enforcement Foundation.

It is a program to build greater public respect, understanding and appreciation for good law enforcement practices.

Dr. Pattie J. Bricker, 1252 Uvalde St., Houston, Texas was elected new vice-president of the national osteopathic sorority, Axis, at its recent meeting in Chicago.

Notice of Examination:

THE TEXAS STATE BOARD
OF EXAMINERS

IN
THE BASIC SCIENCES
P. O. BOX 583
AUSTIN, TEXAS

The next examination of the Texas State Board of Examiners in the Basic Sciences has been set for October 12-13, 1959 in Austin, Texas.

Details as to time and place may be obtained by writing to the Chief Clerk, State Office Bldg., Room 1012, 201 East 14th Street, Austin, Texas.

Applications for the April examinations *will not be accepted after October 1, 1959* and all necessary information and documents required by the Board of examinees must be completed and in the applicant's file by that date. Those interested in participating in this examination should act immediately.

Executive Secretary's Travelogue

Following the last report of the executive secretary in which he had inspected the Mid-Cities Memorial Hospital and the Plattner Clinic and Hospital with Blue Cross for approval in Blue Cross membership, the executive secretary reports that they were both accepted by Blue Cross as member hospitals.

The executive secretary, until August 8, was pretty much occupied with detail work in the state office in getting the August Journal to press and starting arrangements for the publication of a new directory which we hope will go to press not later than October 1 of this year.

On August 8 the Texas Osteopathic Insurance Liaison Committee (TOIL) held its meeting at the Fort Worth Club, Fort Worth, Texas. All members were present with the exception of Dr. George Miller who was unable to attend.

This particular TOIL Committee meeting was one of the best policy meetings they have had to date and it looks as if the TOIL Committee is just getting underway to where accomplishments in the interest of the pub-

lic, the insurance industry, and the osteopathic profession will pay off.

On August 10-11 the executive secretary was again in the office catching up on correspondence, etc.

On the morning of August 12, the executive secretary held a lengthy meeting with the executive director of the Texas Hospital Insurance Service (THIS) at their office in the W. T. Waggoner Bldg., Fort Worth, over certain policies in which we had had certain protests. The matter was brought to a very satisfactory understanding. However, we warn the membership and the hospitals that this company sells three different types of policies and one of them in particular is a limited type of policy in many respects. It has many exclusions and should be watched very closely, particularly those issued to people over 65 years of age.

At 4:00 P.M. on August 12, the executive secretary left for Houston, Beaumont, and Port Arthur. This was again an interesting trip, and the executive secretary learned the value of his white hair . . .

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road around the city, he was unfortunate enough to blow out a rear tire on a perfectly dark night, without lights. This proved to be a rather difficult situation but with the help of a cigarette lighter he was able to change the tire after considerable puffing and blowing which proved his age. As he was tightening the lugs on the wheel, an 8-wheel truck passed him at about 70 mph. but stopped on the hill above him and backed up behind the executive secretary's car and put his lights on him and offered help. The executive secretary told him he was late but he sure appreciated his lights and what little help he could give him. The truck driver took over and finished the job for the executive secretary and when the executive secretary offered to pay him for his help, he steadfastly refused to accept anything but did inform the executive secretary that he would not have stopped had he not seen the white head . . .

The executive secretary has often wondered what value white hair has and now he knows. The truck driver further informed the executive secretary that Atlas tires were wonderful if he needed another one and he pointed out the truck he was driving which belonged to Humble Oil Company . . . (Just a little free advertising for Humble Oil Company which we are happy to give them).

The executive secretary managed to reach Houston about 1:00 P.M. and while white hair may have some value, he could tell from the exertion of changing his tire that it also spelled "age" as he was pretty well exhausted. So he proceeded to have a couple of drinks of buttermilk which has certain sleeping qualities that manage to give him a good night's rest.

He was up at 8:00 A.M. Thursday morning and went immediately to Doctors Hospital at Houston, as he spent the night in a tourist court just a half mile from this institution. At Doctors Hospital he had an interesting

meeting with several doctors of the staff—Drs. James E. Cary, Jack P. Leach, Calvin J. Lyons, H. Murphy Webb, James H. Kritzler and Nick J. Patzakis, a new arrival in Houston.

The executive secretary also discovered that Doctors Hospital was changing administrators and that Mr. Hal Coker of the Houston Osteopathic Hospital was taking over as Administrator of Doctors Hospital on September 1st.

The executive secretary left the hospital at 11:00 A.M. and stopped at Sears Roebuck where he replaced two of his tires. (This is not an advertisement for Sears Roebuck, but just a report on where he was.)

Following this purchase, and a good lunch, he proceeded to the new offices of Dr. Harold Fannin where he had quite a little visit in this new and modern office. He then proceeded to the Yale Clinic and Hospital to see Dr. Anthony W. Vila but was disappointed in that Dr. Vila had the afternoon off and was not in.

The executive secretary drove on to Houston Osteopathic Hospital for a talk and discussion with Mr. Hal Coker, Administrator and while there he held a conference with Dr. David Jaffe and Dr. George G. Clark. He also met Dr. William G. Castle, the new pathologist who at present is located in Corpus Christi.

The executive secretary managed to reach another tourist court on the far side of town and checked in, following which he visited the Blue Cross offices for a scheduled meeting with Dr. G. W. Thompson, Mr. Tidwell and Mr. Wilmesmeir. This meeting lasted until after 7:00 P.M. when as a group they proceeded to the Club in the Shamrock Hotel for dinner.

He was again able to get to bed by 11:00 P.M., but was up the following morning at 7:00 to meet Mr. Tidwell at the Blue Cross offices, and together they went to the Blue Cross offices in Beaumont where a conference was held with the local Blue Cross officials there.

At 12:00 Noon, Dr. Ralph C. Merwin of Orange, Texas met the executive secretary at the Blue Cross office and took him immediately to Doctors Hospital at Groves where they had a rather lengthy discussion with the new administrator, Mr. Leonard Colley over the Blue Cross situation in that institution.

At 6:00 P.M. the executive secretary was entertained at dinner by Dr. Robert J. Shields and Mr. Colley, following which they proceeded to the offices of Dr. Kenneth R. Watkins for a meeting at 7:30 P.M. of the staff of Doctors Hospital at Groves.

Present at the meeting were Mr. Tidwell and Mr. Wilmesmeir of Blue Cross in Houston and Mr. Gayer of Blue Cross in Beaumont, Dr. G. W. Tompson, Chairman of the Insurance Committee of the TAOP&S and the executive secretary.

Hospital staff members in attendance were: Drs. J. E. Barnett, John B. Eitel, A. L. Garrison, J. C. Montgomery, Robert J. Shields, Herbert A. Tait, Jack K. Taylor, Hubert M. Scadron, Ralph C. Merwin, Tyra A. Morgan, Nicholas G. Palmarozzi, John R. Ruffle, and Larry A. Giffen. Dr. Kenneth R. Watkins was out of the city.

This accounts for all of the staff members of Doctors Hospital at Groves and it certainly was good representation for this meeting. The meeting lasted until 12:00 Midnight and we feel much was accomplished.

Even though Doctors Hospital at Groves has been notified that in 90 days it will be dropped from membership in Blue Cross, we hope we were able to impress the staff sufficiently that they will make corrections within the next 90 days so that Blue Cross will consider an extension of the notice.

The difficulty at this institution was brought about by a lack of understanding upon the part of the members of the staff in reference to the problems in connection with their contract with

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Blue Cross. It is to be hoped that other hospitals will take heed and evaluate their dealings with Blue Cross, lest they get notice of cancellation of their contracts.

The executive secretary arrived back in Houston at 3:00 A.M., a tired and weary man but we are sure no more worn out than Dr. G. W. Tompson, Mr. Tidwell and Mr. Wilmesmeir who so gladly entered into this meeting in an effort to protect the public of that area and to see that they get hospitalization under osteopathic care.

The executive secretary did not get up until 2:30 P.M. on Saturday which should pretty much prove he was tired out. Being too late to do any work with the doctors—they all being out of their offices on Saturday afternoons—he drove to Galveston for a little sea breeze that afternoon and night. He returned to the office on Monday, August 17, for another busy week in the office.

On Sunday, August 23, the executive secretary proceeded to the meeting of the Texas Osteopathic Hospital Association (TOHA) held August 22-23 at the Adolphus Hotel, Dallas, Texas where he appeared on the program and met with the officers of the TOHA. A report of this meeting is carried elsewhere in the Journal. He returned to the office on Monday, August 24.

On Wednesday, August 26, the executive secretary left the city at 8:00 A.M. for a tour of District #13 with Dr. Thomas R. Turner of the Fort Worth Osteopathic Hospital.

Their first stop was at Reed Memorial Hospital, Cooper, Texas where they visited with Dr. Dean E. Wintermute. From there they went to Ladonia, Texas and visited with Dr. Gordon A. Marcom at the Marcom Hospital and Clinic, and then to Wolfe City, Texas where they visited with Dr. Selden E. Smith at the Wolfe City Hospital.

At Leonard, Texas they stopped in to say hello to Dr. Robert D. Van

Schoick, and then proceeded to Denison, Texas to the Denison Hospital and Clinic. On arrival they found that Dr. Stephen F. Kubala was out for the day, but they did visit with Dr. Ward Huetson and Dr. Marion A. Groff.

The executive secretary and Dr. Turner then drove to Denton, Texas where they visited with Dr. Robert Nobles at the Elm Street Hospital and Clinic. Dr. Nobles recently moved there from Lorenzo, Texas to take over Dr. Dan B. Whitehead's practice as Dr. Whitehead is limiting his practice to surgery. Dr. Marvin T. McDonald was away on vacation, Dr. Whitehead was at his ranch, and as it was late in the evening, they were unable to contact Dr. Henry E. Roberts.

This, of course, was a very hard and rushed trip but they were able to contact the offices of every doctor in District #13 with the exception of Dr. David D. Matthews at Honey Grove, Texas to whom they offer their apologies, but time did not permit them to make this additional 50 miles. They arrived back in Fort Worth about 11:00 P.M.

On Thursday, September 27, the executive secretary spent the morning in conference with Charles F. Mayer and Charles H. Edwards, Ph.D., sponsors of the Southwest Research Institute of Hypnosis, over a letter the executive secretary had written to members of our association who had at one time or another taken a course on hypnosis under their auspices. The difficulty arose because of a letter sent to the executive secretary by the Texas State Board of Medical Examiners in protest of one of our men having referred patients to this Institute and also the fact that the Institute had used the names of 16 of our members in a letter to the Better Business Bureau of Dallas, in reply to the Bureau's investigation.

The protest from the Medical Board was that these men do not have a license to practice medicine in Texas and to refer patients to them is a violation

of the Medical Practice Act. The Medical Board has no objections to members taking any educational courses offered, but it does not approve of the support of members of our profession to any violation of the law—namely people treating any disease (mental or physical) who do not hold a medical license.

We hope that members of the osteopathic profession will recognize this fact and desist from referring patients to these people's offices for any type of care. However if a physician desires to use hypnosis from one of these men in his office, under his direction and the physician collects the fee and pays the men for what they do, there can be no violation of the law.

On Tuesday, September 1, the executive secretary met with members of the Public Health Committee at the Hotel Texas in Fort Worth for a pre-meeting discussion of various problems.

The Public Health Committee then met on Wednesday, September 2, for its first meeting of the fiscal year, from 8:00 A.M. - 4:00 P.M. at the state office in Fort Worth. This was a busy meeting devoted to principles and malpractice insurance which is causing the committee considerable concern.

On September 3, at 9:30 A.M., the executive secretary held a conference in his office with Mr. Ralph Webb of Blue Cross in reference to an expansion of the Blue Cross-Blue Shield program.

We call to your attention that Blue Cross is making a considerable change in their coverage plan and elsewhere in this Journal is an announcement of that change. They are now carrying, on an individual basis, people over 65 years of age in the Blue Cross and Blue Shield programs.

On September 4, the executive secretary met with Mr. Lee Galligher for a 1½ hours discussion over our As-

sociation's insurance plans which are carried by the Sid Murray Agency of Corpus Christi, Texas. It is unfortunate that some of our members have not recognized the value and the protection to themselves given to them by these group plans. We hope each member will take advantage of the plan since it has been reopened for new members.

See you next month . . .

Good Public Relations

The Blackwood-Mims Clinic and Hospital, 210 East Grand Ave., Comanche, Texas, celebrated its 15th anniversary on August 21, 1959.

The newspaper "The Comanche Chief" carried a wonderful story with pictures of Drs. William D. Blackwood and Roy D. Mims, and pictures of the hospital along with a full page picture story of the hospital, during this celebration.

Thousands of people visited the institution to help celebrate this anniversary and the newspaper carried a complete story of the founding of this hospital and its services, over the past 15 years, to the people of that community.

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Vacationing Doctor Undergoes Operation



JOHN L. WITT, D.O.
Groom, Texas

We have been informed that while on vacation in Deer Park, Washington, Dr. John L. Witt suffered a gastric hemorrhage and was operated on at St. Lukes Hospital, Spokane, Washington where a sub-total gastrectomy was performed.

We are advised that Past-President Witt has left the hospital and is now recovering at his sister-in-law's house.

We all wish Dr. Witt a speedy recovery and an early return to the state of Texas.

LOCATIONS

O'DONNELL, TEXAS — A small town of 1,600 people. Has a big trade area. Farming country and numerous ranches. Business good. Approximately 4,000 people in trade area. Need doctor very badly. If interested, contact Hugh Lott, Box 386, O'Donnell, Texas.

FORT WORTH, TEXAS—Former office of the late Dr. Robert L. Hodshire, 1501 N.W. 25th St. A letter from Dr. A. L. Hotchkiss, Optometrist, of 1507 N.W. 25th St., indicates he would like to have another D.O. locate in this office. It is a good opportunity.

ROCHESTER, TEXAS — Needs good general practitioner. Immediate trade area has population of 4,000. Sit-

uated in center of rich farming and ranching area. More than half the farming land is irrigated. Quite a bit of oil in vicinity. New air-conditioned clinic building ready for use. Willing to furnish clinic to the satisfaction of the doctor who will take over. If interested contact Mr. Clyde S. Crawford, President, The Home State Bank, Rochester, Texas.

Educational Meetings

TEXAS ACADEMY OF APPLIED OSTEOPATHY

The Texas Academy of Applied Osteopathy is conducting a Seminar in Osteopathic Evaluation, Diagnosis and Management in the Low Back—Lower Extremity Syndrome on September 25-26, 1959, at the Villa Capri Motel Hotel, 2360 Interregional Highway, Austin, Texas.

Dr. Catherine Carlton, 815 West Magnolia St., Fort Worth, Texas is secretary-treasurer of this group.

TEXAS OSTEOPATHIC RADIOLOGICAL SOCIETY

The Texas Osteopathic Radiological Society will meet September 27, 1959, at the Villa Capri Motel Hotel, 2360 Interregional Highway, Austin, Texas.

All Texas D.O.'s are invited to attend. Registration is \$10.00 which includes luncheon. Luncheon fee for wives and guests—\$3.00.

J. B. Rushing, M.D., of Houston, will speak on Whip-lash Injuries of the Cervical Spine. Charles O. Chester, D.O. of Granby, Mo., will speak on Osseous Malignancies and Heart Disease.

For those arriving the 26th (Saturday afternoon) a cocktail party has been arranged by Dr. Joseph L. Love for 5 p.m. at the Villa Capri. Dinner will be "dutch" and those desiring may attend the Maryland-Texas U Football game that night.

GOOD PUBLIC RELATIONS

From front page of Fort Worth Star-Telegram—August 15, 1959



MRS. HOMER C. CONLEY . . . heart stopped, then started.

Woman Revived After 5 to 9-Minute "Death"

The delicate hand-massaging of the heart by a surgeon has restored life to a Fort Worth woman who was "dead" for from five to nine minutes.

The dramatic life and death drama in an operating room at Fort Worth Osteopathic Hospital was revealed to the Star-Telegram Friday night.

The patient, Mrs. Homer C. Conley of 4305 Hilldale Dr., was reported in "good condition."

Mrs. Conley, 38-year-old mother of six children, was admitted to the hospital for major surgery.

An attending physician said that after the anesthesia had been administered, Mrs. Conley suffered a cardiac arrest—stoppage of the heart.

Revival was attempted and after five minutes proved to be of no avail.

Then an incision was made, the chest cavity opened and one of the surgeons began to massage the still heart. After massaging four or five times, a faint beat was detected.

The massaging took less than a minute, one of the physicians said.

He reported that Mrs. Conley had been unconscious from the time of the incident until about 5.45 a.m. Friday when her memory began to return and she could converse with others.

He said she was technically dead for from five to nine minutes.

(Editor's note: Mrs. Conley has completely recovered and is again active.)

FINANCIAL REMUNERATION

Article XI of a Series of 12

A characteristic of every profession is that financial remuneration is not the main objective of its members in rendering care. Rather the first purpose is to serve. In this regard, a profession differs inherently from occupations which hold financial reward to be their basic objective.

In the professions of law and medicine, services are ordinarily performed on a fee rather than a wage or salary basis. Professional service, accomplished in a professional manner, is a primary concept, with financial remuneration a secondary consideration. It is in the acceptance of these concepts that the professions display most clearly their sense of obligations to the public.

Article VI of the Code recognizes the long-standing principle that medical indigency, mutual professional obligation, and public duty may require physicians to provide their services without financial remuneration. Such circumstances place valid claims upon the profession and may negate expectation of payment for services provided. In what degree a doctor is obligated to meet such public needs depends largely upon local conditions, and upon the presence or absence of local health plans. The unflinching willingness of doctors to meet them, however, indicates, probably better than any other one thing, the public service aspect of the profession of healing.

Fees for professional services differ throughout the country. Nonetheless, in most areas a certain level of financial remuneration for services does become established. Thus the primary obligation of providing health care does not become impeded or affected by economic conditions of bargaining or competition. The needs of the public for health care cannot be jeopardized by open competition, or "buyer beware" principles. The training and skill of

physicians cannot be bargained for, and the public right to seek out such services, free from competitive conditions, must be maintained. Otherwise both public confidence and the standard of health care are undermined. The doctor, in turn, has a right to expect to be free of competitive conditions, and be able to exercise fully his professional knowledge and training apart from such circumstances as are found in ordinary businesses or corporations.

There exists a relationship of trust and confidence between the physician and the patient both in regard to the providing of professional services and the manner of payment. A patient is entitled because of this relationship of trust and confidence, to full knowledge concerning the fees which he will be required to pay. Since a physician receives certain privileges, among them protection from financial competitive conditions and other commercial factors, patients have the right to expect full financial knowledge. As is recognized by the profession, a complete knowledge concerning remuneration avoids dangers that might otherwise arise. The public accords doctors special privileges. They are protected from advertising and all practice under stringent regulation and licensing, given legal considerations not accorded other persons, and occupy positions of prestige and responsibility in the community; and their professional services are placed upon a special level.

In turn, the public and the leaders of the profession recognize that physicians cannot commercialize their services. In particular because of the relationship of trust and confidence they may not make secret arrangements among themselves for the division of a fee paid by the patient for the services of one doctor. Therefore, the division of a fee among doctors without the knowledge of the patient, "fee



splitting" in common parlance, is prohibited by the A.O.A. Code of Ethics and by the laws of most states.

Modern conditions have resulted in changes in the economics of medical practice, but the basic medical principles remain unchanged. A doctor should be paid a fee commensurate with the professional services rendered by him to a patient. A doctor should not be paid in the absence of professional services, nor on a basis not commensurate with the extent or type of services rendered by him in a particular case. Payment of any secret commis-

sions or the splitting of fees without the knowledge of the patient tends to commercialize the profession and lower the standard of care.

These facts are so well accepted as to need no discussion. Adherence to these primary principles of ethical care leads to the development of higher professional standards among the physicians and greater confidence on the part of the public. Patients expect their physicians to exercise integrity and trust. They are the basic factors in the doctor-patient relationship, which is such an important element in patient care.

TOHA MEETS

The Annual Meeting of the Texas Osteopathic Hospital Association, August 22, 23, 1959, at the Adolphus Hotel, Dallas, Texas, was a huge success.

There were 35 hospitals represented at this meeting by 83 people consisting of hospital administrators, doctors, and hospital personnel. Among this group were 35 administrators and 35 doctors.

The TOHA is on the move and good programs such as the one held last year and this year will undoubtedly prove to the hospitals the advantages of the administrators and physician representatives being present at all TOHA meetings.

Mr. Louis S. Taylor, Administrator of the Dallas Osteopathic Hospital has served as President of the TOHA for the past year. Program Chairman was Mrs. Jane Siniard, R.N., Administrator of the Fort Worth Osteopathic Hospital.

The program for this meeting was as follows:

Following the Call to Order, the entire Saturday morning program consisted of a panel of insurance executives appointed by the Texas Osteopathic Insurance Liaison Committee (TOIL) who discussed insurance problems and third party medicine. The panel was

moderated by Dr. G. W. Tompson and consisted of Mr. Charles Scott of Great American Life Insurance Company, Mr. Russell Donovan of United American Life Insurance Company, and Mr.

PORTER CLINIC HOSPITAL LUBBOCK, TEXAS

G. G. PORTER, D.O.
L. J. LAUF, D.O.
J. W. AXTELL, D.O.
HARLOW O. L. WRIGHT, D.O.
F. O. HARROLD, D.O.
ROBERT C. BURNS, D.O.
JAMES B. MOTT, D.O.
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ROBERT H. NOBLES, D.O.
MAURICE F. PRIDDY, D.O.

COMPLETE HOSPITAL AND CLINICAL SERVICE

An Osteopathic Institution

Tom Attridge of Equitable Life Insurance Company.

Each member of the panel took one phase of insurance as his topic, and the program lasted for approximately one hour. Following a coffee break, the panel then conducted a question and answer period which extended past the noon hour.

At the afternoon session, Mr. Louis S. Taylor spoke on "Future Hospital Planning," covering the topics as presented at the Regional Hospital meeting of the federal government, held in New Orleans, which Mr. Taylor attended as an appointed representative for the osteopathic profession for this region.

Following Mr. Taylor's talk, a panel discussed "Nursing Today and in the Future." Moderator was Mr. J. D. Weatherly, Administrator of the Stevens Park Osteopathic Hospital in Dallas and the panelists were Mrs. Billy McAfee, R.N., also of Stevens Park Osteopathic Hospital; Mrs. Elsie Thorson, R.N. of Dallas Osteopathic Hospital, and Mrs. Lillian Maulsby, R.N., of the Fort Worth Osteopathic Hospital.

At 4:00 P.M. Dr. P. R. Russell, Executive Secretary of the Texas Association of Osteopathic Physicians and Surgeons, spoke to the group on "The Hospital Licensing Law" and "Requirements for Hospital Registration, 1963 by TAOP&S."

The meeting was then recessed and a banquet was held at 7:00 p.m., at which Dr. Raymond D. Fisher, president of the TAOP&S addressed the group.

On Sunday morning, August 23, the program was put on by Dr. H. William Guinand, full time hospital inspector for the Bureau of Hospitals of the American Osteopathic Association. His subject was "Interpretation of The Book on Minimum requirements, Standards and Regulations for Osteopathic Hospitals approved for training of Interns and/or Residents."

This was followed by a coffee break, after which questions were propounded to Dr. Guinand for a period of 1 1/4 hours. It is too bad that staff members of all of our hospitals could not have heard this program.

At 12:00 noon, the official business meeting of the TOHA was called to order and after an hour's discussion of problems confronting the TOHA, election of officers was held and the following were elected:

President, Mrs. Jane Siniard, Administrator, Fort Worth Osteopathic Hospital; President-Elect, Gordon A. Marcom, D.O., Marcom Hospital and Clinic, Ladonia; Vice President, Lee Davis, Administrator, Community Hospital, Inc.; Secretary-Treasurer, Mr. William L. Davis, Administrator, Amarillo Osteopathic Hospital; Trustees, G. W. Tompson, D.O., Community Hospital, Inc., Houston and P. R. Russell, D.O., Fort Worth Osteopathic Hospital.

Hospitals represented and in attendance were:

AMARILLO OSTEOPATHIC HOSPITAL: W. L. Davis, Administrator.

ARANSAS HOSPITAL: Mr. John Gilmore, Administrator and Mrs. Gilmore, Dr. and Mrs. W. N. Tinnerman.

BIG SANDY HOSPITAL AND CLINIC: L. W. Lock, Administrator and Maxine Harris.

BRYSON HOSPITAL AND CLINIC: Dr. and Mrs. Robert C. Greer.

COATS-BROWN CLINIC AND HOSPITAL: W. K. Rhinesmith, Administrator and Dr. Howard R. Coats.

COMMUNITY HOSPITAL, INC.: Lee Davis, Administrator, Dr. G. W. Tompson, Eudora Davis, Audrey Moffett and Mary Hightower.

COASTAL HOSPITAL: Dr. W. S. Gribble.

CORPUS CHRISTI OSTEOPATHIC HOSPITAL: W. D. Brown, Administrator.

CREWS HOSPITAL AND CLINIC: Sidney Gustafson, Administrator and Dr. Willis L. Crews.

CURREY CLINIC-HOSPITAL: Dr. and Mrs. Palmore Currey, Dr. and Mrs. Charles P. Barberce, and Charles P. Barlum.

DALLAS OSTEOPATHIC HOSPITAL: Mr. Louis S. Taylor, Administrator; Dr. Paul A. Stern, Dr. Ralph I. McRae, Dr. R. B. Price, Ann Yett, Alice Garside and Elsie Thorson.

DOCTORS HOSPITAL (Groves, Texas): L. R. Colle, Administrator and Dr. Paul D. Siefkes.

DOCTORS CLINIC - HOSPITAL: Dr. William R. Harris and S. W. Harris.

EAST TOWN OSTEOPATHIC HOSPITAL: Dr. Marille Sparks, Administrator and Earline Bourland.

ELM STREET HOSPITAL AND CLINIC: Mary Ellis and Dr. Robert Nobles.

FORT WORTH OSTEOPATHIC HOSPITAL: Mrs. Jane Siniard, Administrator; Dr. L. G. Ballard, Dr. Raymond D. Fisher, Dr. P. R. Russell, James T. Roberts, D. J. Tousignant, Mary Hinerna, Emma Bennett, Anne Jones, Dorothy Sullivan, and Lillian Mauleby.

HAMMOND HOSPITAL: Dr. Claude J. Hammond and Dr. Auldine Hammond.

HOMESTEAD ROAD HOSPITAL AND CLINIC: Dr. and Mrs. R. W. Schoettle.

HOUSTON OSTEOPATHIC HOSPITAL: Anne C. Haldane, Administrator.

INDUSTRIAL CLINIC AND HOS-

PITAL: Dr. H. A. Hall, Administrator.

LAKE WORTH OSTEOPATHIC HOSPITAL: J. E. Kirkpatrick, Administrator and Dr. H. B. Stilwell.

LAUF CLINIC AND HOSPITAL: Dr. L. J. Lauf.

LUBBOCK OSTEOPATHIC HOSPITAL: Lee Baker, Administrator and Dr. E. S. Davidson.

MILES OSTEOPATHIC HOSPITAL: Dr. and Mrs. J. H. Miles.

MINEOLA GENERAL HOSPITAL: Annette Humphreys, Administrator and Dr. Bernard W. Jones.

MULESHOE HOSPITAL AND CLINIC: Dr. George H. Chambers.

PORTER CLINIC - HOSPITAL: J. N. Porter, Administrator and Dr. Harlon O. L. Wright.

REED MEMORIAL HOSPITAL: Dr. and Mrs. Dean E. Wintermute.

SAN ANTONIO OSTEOPATHIC HOSPITAL: Dr. Everett Wilson, Administrator.

STANTON OSTEOPATHIC HOSPITAL: Dr. Leland B. Nelson.

STRATTON HOSPITAL AND CLINIC: Dr. and Mrs. C. R. Stratton.

STEVENS PARK OSTEOPATHIC HOSPITAL: J. D. Weatherly, Administrator and Billy McAfee, R.N.

TAVEL CLINIC AND HOSPITAL: Agnes Nelson and Dr. Lester I. Tavel.

Tigua General Hospital: Dr. M. G. Holcomb.

WOLFE CITY HOSPITAL: Dr. and Mrs. Selden E. Smith.

NEW BLUE CROSS COVERAGE

During the month of October, Blue Cross-Blue Shield of Texas is offering to individuals and families in Texas, three versions of their "300 Service", plus a Special Service which carries a somewhat lower cost. These plans will be available to Texans in good health who are not able to obtain protection through an employed group, and, for

the month of October only, TEXANS AGE 65 AND OVER MAY APPLY.

Many of our members have already made available non-group literature from Blue Cross-Blue Shield in the waiting rooms of their offices and hospitals. All of the current literature of this kind now in use should be discarded as soon as the new materials

are available. It will be necessary to order supplies of this new literature. Order cards have been, or will be, sent to all members of our association.

Members of our profession have long been concerned with good health care for people over age 65, and have taken care of them without too much concern about their ability to pay. In the last year or so, however, some of our legislators in Washington have become very much concerned over the issue of prepaid health protection for Americans over age 65. The Forand Bill was the subject of extended hearings during the current session of Congress. Many witnesses for and against this type of legislation were heard. Most of them who appeared were opposed to the Forand Bill. We must, nevertheless, be concerned about finding positive answers that can be applied by voluntary methods as an alternative to government legislation and control.

The members of our profession will have their first, and one of their best, opportunities to promote good prepaid health protection for Texans age 65 and over during the month of October.

Blue Cross-Blue Shield of Texas, during that month, will make available four new versions of their individual and family enrollment plans. These will be available throughout the year to all Texans in good health under age 65, but during October only, will be offered REGARDLESS OF AGE.

There are already 72,000 Texans age 65 and over who are protected by Blue Cross-Blue Shield of Texas. They were enrolled through established procedures and planning and include group retirees and others who joined through various types of enrollment. All have been permitted to retain their protection regardless of the age they attain.

This special campaign by Blue Cross-Blue Shield of Texas is one positive answer to this problem which has become critical because it has become political. Our encouragement and support of this campaign is one avenue of positive action that we can take to increase the number of Texans over 65 who have good prepaid health care and thereby decrease the pressure for government action.

JOB INSURANCE INFORMATION

Texas Employment Commission

What do you know about unemployment insurance? Are you covered? Where and how do you file a claim? Could you quit work tomorrow and start living off such benefits? Who pays for this protection?

Can you answer all these questions correctly? Maurice Acers, Commissioner representing employers, is vitally concerned that you understand more about the unemployment insurance program and its operation in Texas.

Let's take the matter of cost. Who pays for the protection? The employer—every cent of it. He pays a tax on the first \$3000 of your annual salary, and whatever benefits may eventually be paid to you in unemployment

insurance checks come out of the combined total of these taxes, which are kept in trust for you in a fund known as the Texas Unemployment Compensation Trust Fund. On April 30 this fund had a balance of \$256,000,000.

Many employees are under the impression that they also pay a tax to the unemployment insurance system. They do not. Chances are they have confused the unemployment insurance program with that of the Old Age and Survivors Insurance program. Both the employer and the worker contribute to this program, but it provides for retirement for male persons after the age of 65 and for females after 62, with income provisions for dependents.

Many employees—and some employers—confuse the unemployment compensation system with the Workman's Compensation program. Unemployment insurance pays job insurance when you become unemployed through no fault of your own. Workmen's compensation provides compensation through private insurance companies or your employer's option, in the case of job-connected illness or injury.

Neither age nor financial position affects eligibility for jobless pay. These are the general requirements: Sufficient wage credits in "covered" employment. The Texas Unemployment Compensation Program covers employers of four or more people (with some exceptions, such as cities, churches, schools, etc.)—about 1,735,000 of the state's employment.

You may not receive payments if

1. You fail to apply for a job through a local TEC office at the time you file your claims.
2. You quit your last job without good cause connected with the work.
3. You were discharged for misconduct connected with your last work.
4. You fail to apply for, or refuse to accept, suitable work when it is offered to you.
5. You are unemployed because of a labor dispute in which you are involved.
6. You received wages instead of notice when you were separated from your last job.
7. You are receiving Workmen's Compensation on a weekly basis.

The salary you make and the length of time you stay on a job determine the amount of your weekly benefits and how long you may draw such benefits.

There's a maximum any claimant can draw regardless of his wage credits

—\$28 for 24 weeks. The minimum is \$7 a week. A claimant will draw the full amount to which he is entitled if he (a) renews his claim regularly; (b) does not find work in the meantime and remains able to work and available for work. In most cases claimants either find a job or the TEC finds one for them before the maximum amount or the maximum time has been used. In fact, the average time a claimant draws benefits in Texas is 13.3 weeks. The same TEC office which accepts claims also starts immediately to place the applicants in suitable employment. TEC fills some 45,000 jobs a month, and can cut off benefits to persons rejecting jobs comparable to those held at the time of work separation.

The "how" and "where" of filing a claim is simple—the nearest of the TEC's 89 local offices. The "when" is also important. Payments start from the date a claim is filed, not the date of job separation. While the TEC offices register all claimants, all payments come from the state office by direct mail.

If you are an employer and have questions about TEC operations, address your letters to Mr. Maurice Acers, Commissioner Representing Employers, Texas Employment Commission Building, Austin 1, Texas.

If you are an employee and you have questions about your rights and responsibilities under the Texas Unemployment Compensation Act, address your letters to Mr. Robert F. Newman, Commissioner Representing Workers, Texas Employment Commission Building, Austin 1, Texas.

Colonel S. Perry Brown, Chairman and Executive Director of the Texas Employment Commission, represents the public. His address is the same as that shown for the other two Commissioners.

AUXILIARY NEWS

Report—National Auxiliary Convention

July 13-17, 1959

The 1959-60 slate elected during the meeting are:

President, Mrs. George W. Northup of Morristown, N. J.; President Elect, Mrs. Campbell A. Ward of Mt. Clemens, Mich.; First Vice-President, Mrs. Wm. B. Strong of Garden City, N. Y.; Second Vice-President, Mrs. Virgil L. Sharp of Hales Corners, Wisc.; Recording Secretary, Mrs. George F. Marjanof, Palos Heights, Ill.; Treasurer, Mrs. M. S. Gerlach of Santa Barbara, California.

Newly elected directors were: Mrs. Earl K. Lyons of Elkins, West Virginia; Mrs. Gervase C. Flick of Cleveland, Ohio.

A recommendation to the House of Delegates is of special importance to the Texas Auxiliary since our Recording Secretary forwarded it by mail to the National Recording Secretary. I made a brief talk urging its acceptance, but only part of it was adopted. The feeling of the Delegates was that the income is definitely needed from the 'third year in practice physicians' wives'. Mrs. Marjanof, the National Recording Secretary also stated that the secretarial work would be greatly increased by the adopting of the second part of the amendment. This is it: The Texas Auxiliary recommends the following amendments to the By-Laws:

Article IV, Section (b): \$1.00 per capita for wives of interns, resident physicians, and members whose husbands are in their first and second year of practice. ADOPTED.

Section (c): \$5.00 per capita for

wives of physicians in their third year of practice. NOT ADOPTED.

FUTURE PROPOSALS

Several pertinent ideas and philosophies concerning various allied subjects were discussed. Among them a proposal that we adopt a new emblem. The new emblem has been placed on two issues of the AAOA Record. Another has to do with the fact that it may be necessary in the future for the House of Delegates and the Board of Trustees to have their meetings separate from the National Convention. The Auxiliary will decide at that time whether to have their meetings separate or not (i.e. House of Delegates).

Several suggestions were made which might be helpful to District Auxiliaries.

1. It might be interesting to discuss the fact that most Missionary Boards refuse to send osteopathically trained doctors as Medical Missionaries.

2. State Presidents should try to visit Auxiliaries at a time when they can attend the business sessions and be helpful.

3. Some Auxiliaries have found it is helpful to have a special meeting with husbands so that they can understand the worth of the work of the Auxiliary. In Pennsylvania the State President of the men's organization send a letter to wives in the state asking them to join their local Auxiliaries.

Besides the social activities which are always so much fun at conventions—the banquets, the style-shows, the big city style entertainment—there were many opportunities to chat with new found



friends. It has been a great year for our profession — I want to sincerely thank you members of the AAOA for allowing me to serve you as a State Delegate.

Mrs. W. B. Rountree
San Angelo, Texas

(Editor's Note: Mrs. Rountree wrote an excellent report on the national auxiliary convention. It is unfortunate that space did not permit us to print the entire report. We are sure all of it will be reported in the AAOA Record.)

Mid-Year Clinical Conference of the American College of General Practitioners In Osteopathic Medicine and Surgery, Des Moines, Iowa, November 8, 9, and 10th

The main theme of the 4th annual clinical conference of the American College of General Practitioners in Osteopathic Medicine and Surgery will present current ideas and a review of recent literature on emergency situations that occur in the every-day practice of osteopathic medicine. The conference will also include a three day seminar in hypnosis.

Prominent speakers from the profession will include Dr. Galen S. Young, President of the American Osteopathic Association, Dr. Fred Mitchell, Chattanooga, Tennessee, Dr. Leo Wagner, Lansdowne, Pennsylvania, Dr. Alex Wilcox, Los Angeles, California, Dr. Neil Kitchen, Detroit, Michigan, Dr. Robert Reinfrank, Tulsa, Oklahoma.

Doctors M. L. Ford, L. Ditrick and J. Rowland will conduct the hypnosis sessions during the three day meeting.

Other professional speakers will include Col. Thurston T. Paul, Deputy Commander of the Army Ballistic Missile Agency, Dr. Cann, Director of the Poison Information Centers, Dr. Charles F. Weiss, Detroit, Michigan, Parke-Davis and Company, Dr. Paul Newman, Norwich, New York, Eaton Laboratories, Mr. Landstree, Civil Defense Authority of Battle Creek, Michigan, Dr. Irving D. Laudeutscher, Denver, Colorado, Nuclear Radiation Casualty expert.

September, 1959

ABSTRACTS

LOUIS GUSTAVE MANCUSO, D.O.

BLOOD PROTEIN ABNORMALITIES IN ASTHMATIC CHILDREN

H. S. Tuft, Journal of Allergy (J. Allergy) 27, 487-493, Nov., 1956. 2 figs., 16 refs.

In a study of the changes in the plasma protein pattern in asthma, carried out at the Jewish National Home for Asthmatic Children, Denver, Colorado, the serum of 121 children aged 5 to 16 years who were suffering from severe asthma was examined by paper electrophoresis. Some of these patients were never free from asthma, while in others the attacks were intermittent. The study showed that the plasma albumin content was lowered, the mean value being 3.44 g. instead of 4.22 g. per 100 ml., but the globulin value was increased, the α_2 -globulin fraction was slightly increased, while the other fractions remained unchanged. In 13 cases an extra, unusual fraction was found in the region between the α_2 and B globulins. The fact that the g-globulin level was highest after a considerable period of remission suggests that the increase in this fraction accompanies a recovery phase, and that injection of this protein might have good clinical results.

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NEWS OF THE DISTRICTS

DISTRICT TWO

Dr. and Mrs. Paul Wood spent the last week in August in Kirksville, Mo. Dr. Wood was with Dr. Geo. Rea, in the Department of Radiology. He also visited his mother, who lives in Kirksville.

Dr. and Mrs. Frank Wheeler entertained members of the profession and friends on September 5, to honor Dr. and Mrs. Paul S. Snoke.

Dr. Snoke has recently moved here from Philadelphia. He is a member of the Department of Anesthesia at Fort Worth Osteopathic Hospital.

Dr. and Mrs. Hugo Ranelle announce the marriage of their daughter, Betty Lee, to Mr. Floyd O. Hardimon, on September 4. Mr. and Mrs. Hardimon will reside in New Mexico.

Dr. George Pease has gone to Mexico City to make arrangements with Dr. Dimetrio Sodi Pallero to obtain his services as well as four of his colleagues to put on a program this next summer. The program will cover all phases of cardiac and peripherovascular disease. This is in conjunction with the forthcoming Fourth Annual Convention of the Susan Baker Memorial Cardiovascular Foundation, which will be held in Mexico.



DISTRICT FIVE

Seventy-five administrators and physicians with thirty-five hospitals represented attended the annual meeting of the Texas Osteopathic Hospital Association on August 22 and 23 at Hotel Adolphus. This was a record registration, according to out-going president Louis Taylor.

A cocktail dinner hour preceded the District Five meeting on September 17 at the swank Industrialist Club. Dr.

Roland Young presented a summary of AOA convention events and projected district goals. Committees were appointed to plan next year's state convention.

East Town Hospital underwent an inspection on September 14. Dr. H. William Guinand, AOA Bureau of Hospitals, made the visitation. A paperwork weary staff, anticipating intern training approval, made an all-out effort on the records.

Dr. James Williamson has recently completed redecorating and doubling the size of his Seagoville Clinic with additional treatment rooms and a dental suite.

After two month's postgraduate pediatric study, Dr. Robert Moore has returned from Linz, Arizona. Dr. Moore enthusiastically describes the training as excellent. While at Children's Hospital, he scrubbed in on 307 surgeries.

A Poison Information Center at Parkland Memorial Hospital has been made available to all physicians in this area. The newly established center has been made possible by funds of the Dallas County Medical Representatives Society. It is staffed by a Ph.D. toxicologist and resident pathologists who offer a twenty-four hour service.



DISTRICT EIGHT

Dr. C. A. Myers and Dr. L. W. Taylor have opened their office in Corpus Christi for the practice of general medicine and surgery. Both were formerly interns at C.C.O.H.

Dr. A. J. Huling has also opened offices in Corpus Christi.

Dr. Wm. G. Castle, who has just completed his pathology residency at



Kirkville, has located in Corpus Christi and is accepting tissues for pathological diagnosis. Specimens may be sent to P. O. Box 1193, Corpus Christi.

The new interns at the Corpus Christi Osteopathic Hospital are Dr. Ralph Landsberg of Buffalo, N. Y., and Dr. Dale Williams of Kent, Mo. Both are recent graduates of K.C.O.S.

A room at the C.C.O.H. has been redecorated in Memory of Dr. Wm. A. Jones through the efforts of his wife and many friends.



DISTRICT ELEVEN

On July 27, 1959, a district meeting was held at Tom Buncheds in the upper valley. Present were Dr. and Mrs. H. D. Smith, Dr. R. Valdivia, Dr. and Mrs. J. E. Holcomb, Dr. and Mrs. M. G. Holcomb, Dr. and Mrs. W. F. Hall, Dr. and Mrs. Owen Vowell, Dr. and Mrs. L. N. Sanders and Dr. and Mrs. M. A. Calabrese.

Dr. M. G. Holcomb gave a very interesting and minute account of the affairs of the National Convention. His report was very illuminating regarding the relationship between the A.O.A. and the A.M.A. We at this district are in full accord of the position taken by our A.O.A. delegates in standing firm on the principles of Osteopathy.

We are proud and pleased to have in our district two new doctors practicing at the Delgado Green Cross Hospital in Ysleta. They are Dr. James Martin, recently of Panama City, Florida, and Dr. Daniel Leong. Dr. Martin is a graduate of the Des Moines School and Dr. Leong is a graduate of Kansas City.

We regret the loss of Dr. Bill Weathers who did a tremendous job in building an Osteopathic practice in Dell City. Dr. Weathers is moving or has moved to Fort Worth. So you boys in Fort Worth, our loss is your gain, but we still have a gain in Dr. Richard

Smith, who came to El Paso to take over Dr. Weathers practice.

Dr. Robert Pracht from Guymon, Oklahoma, is here visiting Dr. J. E. Holcomb. Dr. Pracht spent much time at Tigua General Hospital observing Dr. J. G. Henery and Dr. M. G. Holcomb in surgery and urology.

Dr.'s M. G. Holcomb of Tigua General Hospital and L. N. Sanders of Park Foothills Hospital attended the Texas Osteopathic Hospital Association in Dallas on August 22, 1959.

Dr. M. A. Calabrese has been asked by the County Judge, Hans E. Brookmoller, to serve on the El Paso County committee of the 1960 White House Conference on children and youth, which he has accepted.

Dr. R. R. Delgado has returned from a three weeks vacation to Detroit and Deerbourne, Mich., where he visited the Osteopathic Hospitals in that area.

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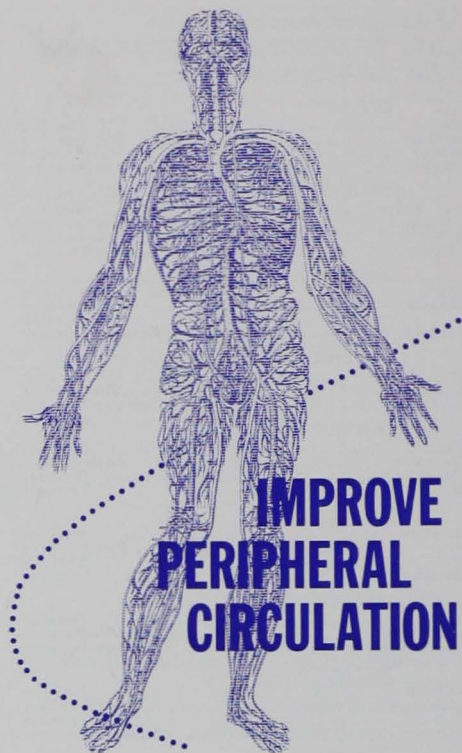
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